## STATEMENT OF

RECEIVED T

| FORM 1  | ORGANIZATION |                                 |      | Į.  | FEGMALLY CENTER |   |
|---|--------------|---------------------------------|------|---|-----------------|---|
| 1. NAME OF<br>COMMITTEE (in   | ı full)      | (Check if name is changed)      |      | mple:If typing, type<br>the lines.  | 12FE4M          |   |
| DELAWAF   | RE DE        | MOCRATIC E                      | ΧĘÇ  | UTIVE BOA   | RD ,            |   |
| ADDRESS (number a   | nd street)   | P. O. BOX 6                     | 1316 | 2   |                 |   |
| (Chack if address is changed)   |              | NORTH MIA                       | MI   | <del></del>   | FL              | 33261                                     |
|   |              |                                 | CITY |   | STATE           | ZIP CODE                                  |
| COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)  USDemocraticExecutiveBoards@hotmail.com  (Check if address is chaaged) |              |                                 |      |   |                 |   |
| COMMITTEE'S WEB PAGE ADDRESS (URL)  |              |                                 |      |   |                 |   |
| (Check if address is changed)   |              |                                 |      |   |                 |   |
| 2. DATE 11" '9" '2012 '   |              |                                 |      |   |                 |   |
| 3. FEC IDENTIFICATION NUMBER C  |              |                                 |      |   |                 |   |
| 4. IS THIS STATE  | MENT 🗵       | NEW (N) OR                      |      | AMENDED (A)   |                 |   |
| I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.                  |              |                                 |      |   |                 |   |
| Type or Print Name  | of Treasure  | DAVID EIN                       | STEI | N   |                 |   |
| Signature of Treasure   | er <u></u>   | & Enter                         |      |   | Date 1          | 1°′09°′20′12°                             |
| NOTE: Submission of   | •            | eous, or incomplete information | -    |   |                 | to the penalties of 2 U.S.C. §437g.<br>S. |
| Office<br>Use<br>Only   |              |                                 |      | For further information or<br>Federal Election Commission<br>Toll Free 800-424-9530<br>Local 202-894-1100 |                 | FEC FORM 1<br>(Revised 02/2009)           |